



PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997

Application or Docket Number

09/072963

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE 7 | | | OTHER THAN OR SMALL ENTITY | | |
|---|--|---|--------------|----------------|---|------------------|--------------|--------------------------------|------------------------|----------------------------|-------------------------------|------------------------|--|
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | RA | | FEE | | RATE | FEE | |
| BASI | C FEE | | | | | | | | 395.00 | OR | | 790.00 | |
| TOTA | L CLAIMS | | D minus | s 20 = | * | | x\$1 | 1= | | OR | x\$22= | | |
| INDE | PENDENT CL | AIMS | Z mini | us 3 = | * | | x4 | 1= | | OR | x82= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | +13 | 5= | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TO | TAL | 395 | OR | TOTAL | | |
| GOLUMN 3) | | | | | | SA | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | | | |
| amendment a | | CLAIMS REMAINING AFTER AMENDMENT | | N PRE | GHEST UMBER EVIOUSLY AID FOR | PRESENT EXTRA | RA | ſΕ | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 10 | Minus | ** | 20 | = | x\$1 | 1= | | OR | x\$22= | | |
| | Independent | · 2 | Minus | *** | 3 | = | x41 | = | | OR | x82= | | |
| ≪ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 5= | | OR | +270= | | |
| (O-1 | | | | | | | | TOTAL ADDIT. FEE OR ADDIT. FEE | | | | | |
| AMENOMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | HI N PRE | Olumn 2) GHEST UMBER EVIOUSLY AID FOR | PRESENT EXTRA | RA | re | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | x\$1 | 1= | | OR | x\$22= | | |
| | Independent | * | Minus | *** | | = | x4 | 1= | | OR | x82= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +13 | 5= | | OR | +270= | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | TAL FEE | | OR | TOTAL ADDIT. FEE | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | PRE | GHEST UMBER EVIOUSLY AID FOR | PRESENT EXTRA | RA | ΓE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | x\$1 | 1= | | OR | x\$22= | | |
| | Independent | * | Minus | *** | | = | x4 | 1= | | OR | x82= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= | | | | | | | | | OR | +270= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |